

Old LEASH pet surrender request form

First name

Faviana

Last name

Rodriguez

Street address

9290 Randal Park Blvd

City

Orlando

Zip code

32832

Email

[favibelieve918@gmail.com](mailto:favibelieve918@gmail.com)

Phone

(786) 717-4255

Reason for surrender

moving to an apartment in the name of another person who is not allowed to have pets by the signed contract

My current living situation is...

I would rather not say.

I have read and understood the pet rehome statement.

yes

About the animal(s)

Number of animals to be discussed?

1

Animal 1

Animal 1 name

Tito

Animal 1 species

cat

Animal 1 color

tiger and white

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

9 - 12 months

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



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Just a few more questions...

How long have you had the animals?

4 months to 1 year

Reason(s) for concern - click all that apply.

- moving
- conflict with others

If moving, why can't pet(s) go?

because the owners of the apartment have a policy against pets and if it is not followed there is a risk of a fine or eviction

How we can help you keep your animals?

lots of care, love and care, he's still a baby

Administration

Shelter to client contact date

08/31/2023

Follow - up required

no

Surrender necessary

no

Staff member making appointment(s).

Hardy

Multiple appointments?

no

Outcome data

Call outcome

referred to other resources

Final call date

08/31/2023

Admin notes

Out of County Left VM to Contact Orange County.

Final surrender outcome

called and cancelled

Close ticket

yes